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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/633,015
		Filing Date	July 31, 2003
		First Named Inventor	PAVLOVSKAIA, ELENA
		Art Unit	3732
		Examiner Name	MANAHAN, TODD E
Total Number of Pages in This Submission	1	Attorney Docket Number	018563-002920US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/Reply . . .	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer			
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

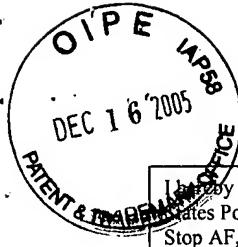
## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Michael T. Rosato		
Date	December 14, 2005	Reg. No.	52,182

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Jennifer M. Smolen	Date	December 14, 2005



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By: Jon D. Molen

PATENT  
Attorney Docket No.: 018563-002920US  
Client Ref. No.: AT-00084.2

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

PAVLOVSKAIA, ELENA *et al.*

Application No.: 10/633,015

Filed: July 31, 2003

For: SYSTEMS AND METHODS FOR  
REMOVING GINGIVA FROM  
COMPUTER TOOTH MODELS

Customer No.: 46718

Confirmation No. 4730

Examiner: MANAHAN, TODD E

Technology Center/Art Unit: 3732

**AMENDMENT UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 3732**

**Mail Stop AF**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed September 22, 2005 on the above-referenced application, please enter the following amendments and remarks:

**Amendments to the Claims**, which are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks**, which begin on page 8 of this paper.